Effective 7/1/2014

Source: Joint Administrative Services

A. Plan Rates	Cost	Employer	<u>Employee</u>
KA 250 Plan Option Regular Full Time			
Single	570.00		
Dual Family	1,055.00 1,539.00		
Transportation, Food Service & Other	,		
Single Dual	570.00 1,055.00		
Family	1,539.00		
KA 500 Plan Option			
Regular Full Time			
Single	528.00		
Dual	977.00		
Family	1,426.00	112.01	653.13
Transportation, Food Service & Other			
Single	528.00		
Dual Family	977.00 1,426.00		
TLC High Deductible	,		
Pagular Full Tima			
Regular Full Time Single	435.00	435.00	.00
Dual	805.00		
Family	1,175.00	721.13	453.87
Transportation, Food Service & Other			
Single	435.00	367.04	67.96
Dual	805.00		
Family	1,175.00	608.48	566.52
B. Account Contributions			
Regular Full Time			
TLC Health Savings Account Contribution (single) TLC Health Savings Account Contribution (dual)		50.13 34.70	
TLC Health Savings Account Contribution (dual)		51.74	
Transportation, Food Service & Other			
TLC Health Savings Account Contribution (single)		42.30	
TLC Health Savings Account Contribution (dual) TLC Health Savings Account Contribution (family)		29.28 43.66	
C. Total Employer Cost Per Group Health Member		10.00	
Regular Full Time		485.13	
Single Health Dual Health		529.46	
Family Health		772.87	
TLC Single Health & "HSA"		485.13	
TLC Dual Health & "HSA"		529.46	
TLC Family Health & "HSA"		772.87	
Transportation & Food Service		,	
Single Health Dual Health		409.34 446.74	
Family Health		652.13	
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TLC Single Health & "HSA" TLC Dual Health & "HSA"		409.34 446.74	
TLC Family Health & "HSA"		652.13	
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Note: Where two employees are married, and they together opt for either a dual or family option, the employer will pay two times the single employer contribution for the plan option selected.

METHOD:

Force TLC employee single contribution to zero.

Proportion other rates to percentage contributions from prior year.

Force 250 employer contribution to same as 500 contribution.

Force "HSA" contribution so total employer equal across plans.